

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>D.R.</i>	<i>70200</i>	<i>2-17-99</i>
O.I.P.E. CLASSIFIER		<i>59</i>	<i>922</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>71555</i> <i>5/16/03</i>	<i>9-22-99</i> <i>4-3-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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